

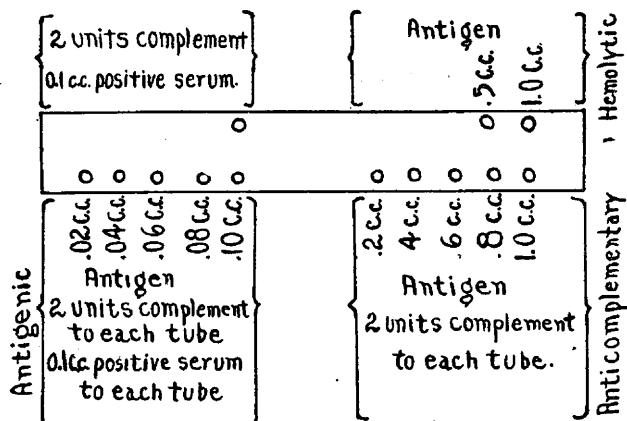
testes and cords, a fifth atrophied testicle and perhaps a sixth which is undescended.

It would be interesting to see a section to note where the attachment of the second set joins the vas of the first, and it is not at all improbable that he has also multiple seminal vesicles, although only one prostate is palpable.

A SHORT METHOD OF MAKING NOGUCHI ACETONE-INSOLUBLE ANTIGEN

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In order to gain the most information from the Wassermann test, more than one antigen should be used in the "set up." One of the antigens so used should undoubtedly be the



"Set up" used in titration.

Noguchi acetone-insoluble, as it will give positive reactions with a higher percentage of syphilitic serums than the alcoholic extracts, while it is less likely to give false positive reactions than the more sensitive cholesterinized extracts. But its preparation requires so much time that this becomes quite a factor in a laboratory where considerable quantities are used. With a view of hastening the process of extraction and evaporation we tried this at higher temperatures and find that boiling temperature in no way interferes. In this way we can prepare and titrate an antigen all in one day.

PROCEDURE

To one part of finely minced beef heart, nine parts of commercial ethyl alcohol are added. (We have recently tried the extraction with denatured alcohol and this seems to do as well. As alcohol is denatured according to varying formulas, some may not be usable.)

This is boiled in a water bath for from ten to fifteen minutes, and filtered while hot.

The filtrate is evaporated over a boiling water bath until the alcohol and water are removed.

The residue is extracted with a small amount of ether.

The ethereal extract is poured into a centrifuge tube and centrifuged until the supernatant liquid is perfectly clear. This is added to ten volumes of chemically pure acetone.

The precipitate is allowed to settle. The greater part of the acetone is decanted, and the rest is poured into a clean graduated centrifuge tube and centrifuged for five minutes at moderate speed, the acetone poured off, and drained thoroughly.

To the precipitate, ten volumes of chemically pure methyl alcohol are added, and the mixture is stirred with a glass rod until as much as will dissolve has gone into solution and then centrifuged until the supernatant liquid is perfectly clear.

This is poured off and kept in a clean, well stoppered bottle.

TITRATION OF ANTIGEN

An emulsion is made with one part of this stock alcoholic solution and nine parts of physiologic sodium chlorid solution.

Titration is performed for antigenic, anticomplementary and hemolytic properties.

The accompanying chart illustrates the "set up" used in titration.

To each tube, physiologic sodium chlorid solution is added to bring the volume to 1.5 c.c.

Incubation is performed for one hour.

To each tube 0.5 c.c. of sensitized sheep cell suspension (5 per cent. sheep blood cells and 2 units of amboceptor) is added.

Incubation is performed for one hour.

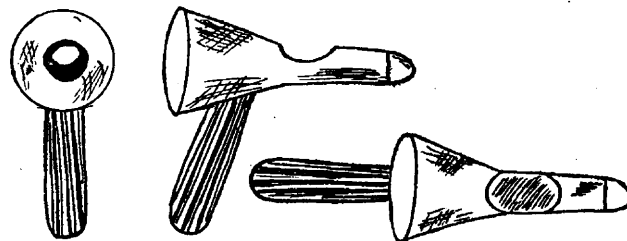
Most of the antigen preparations we have made in this way have had an antigenic unit of 0.02 c.c. of the 1:10 emulsion, while a full cubic centimeter was neither hemolytic nor anticomplementary.

TREATMENT OF CHRONIC GONORRHEAL SKENITIS WITH THE ELECTRIC CAUTERY*

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A not uncommon pelvic focus for the lodgment of the gonococcus is the gland of Skene. In this minute epithelial pocket such an infection may persist indefinitely in spite of local applications. Even if the ducts are exposed and medicinal injections directed into them with a hypodermic needle, the infection may continue without interruption. Often it is possible to express a few or several drops of pus week after week, and month after month, along with such oft-repeated treatment. Furthermore, this minute gland may remain in a chronic state of suppuration without a local symptom, the focus of infection being discovered only in the course of a general pelvic examination. Unless one makes an attempt to express the contents of these ducts, this focus may be entirely overlooked. In this type of gonorrheal infection of Skene's gland nothing less than the complete destruction of the gland will terminate the disease in this locality. This destruction may be easily attained by the use of the thermocautery.

The operation is quite easy and simple, provided one can get a good exposure. For this purpose I take a Kelly endoscope that has been cut off at the proper length so that it will not extend into the bladder, close it with the olive tip, and cut out a small window as shown. I have found that a No. 8 endoscope serves the purpose very well. This makes an instrument, a skenoscope, with a handle that is directed upward out of the way; the entrance is expanded to hold back and protect the labia; the tubal portion protects the urethra except at the point of attack, the gland, the ducts of which protrude into the window cut for the purpose. Under local anesthesia, it is possible to pass a small wire thermocautery



Front, side and top views of instrument devised for use in the treatment of chronic gonorrheal skenitis with the electric cautery.

into the gland without fear of cauterizing any other place than that desired. In order to obtain good light, I have had a small post so placed on the handle that it will carry an E. S. I. light directed toward the aperture. However, any means for obtaining good light will do.

To cauterize the gland, as much discharge as possible is expressed from the ducts. The urethral entrance is cocainized with a 10 per cent. solution for about ten minutes. The instrument is passed, handle upward, until a good exposure is obtained. The entrance of the ducts is sought with a large size hypodermic needle, from which the point has been filed, or with the wire contained in the tubal portion of the instrument. The needle or wire is passed along the duct to the

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